

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

H. SUPPLEMENTARY FOODS

Policy: Supplementary Foods

WIC supplementary foods are those foods containing nutrients that are determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants and children and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary.

In this section

This section contains the following topics:

Topic	Page
H.1. Food Selection Criteria	2
H.2. Definitions of Authorized WIC Foods	6
H.3. Definitions of Special Foods	17
H.4. Products Not Authorized for WIC	20
H.5. WIC Food Package	22
H.6. Food Package Issuance Policy	48
Medicaid Reimbursement	52
Sample Products	54
H.7. Food Package Tailoring	56
H.8. Nutrition and WIC Food Package Counseling Guidelines	62

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

H.1. Food Selection Criteria

In this subsection

The following topics are found in this subsection:

Topic	Page
USDA/FDA Approval	3
Nutrition Criteria	3
Cost	3
Least Expensive Brand	4
Cold Cereals	4
Availability	4
Acceptance	4
Exceptions	4
Utah WIC Program Authorized Foods List	5
Special Food Letter	5

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Food Selection Criteria

Foods are selected for the Utah WIC Program using USDA/FDA approval and nutrition criteria.

Procedure

I. USDA/FDA approval

- a. Products must meet the requirements outlined in the USDA Federal regulations Part 246.10, "Special Supplemental Food Program for Women, Infants and Children," Supplemental Foods.
- b. New and/or previously authorized food products must meet USDA and State requirements for a minimum of one year prior to Utah WIC authorization.

II. Nutritional Criteria

- a. The application needs to include printed nutrition information regarding the item's contents in milligrams, milliliter, or grams per 100 grams of dry cereal, and 100 milliliters of juice, and not reported in United States Recommended Daily Allowances (USRDA's).
- b. Infant formulas must have 10 mg iron per liter and 20 kcals per ounce at standard dilution.
- c. Infant cereals must have 45 mg iron per 100 gm dry cereal.
- d. Cereal must have ≥ 28 mg iron per 100 gms dry cereal; ≤ 17.80 gm sucrose and other sugars per 100 gm dry cereal.
- e. Juice must have 30 mg vitamin C per 100 ml of juice.
- f. Milk must have 400 IU of vitamin D per quart; 2000 IU of vitamin A per quart.
- g. Products with artificial sweeteners are not allowed.

III. Cost

- a. *Except for cereal*, specific brand name food items cannot cost more than 5% above the current average cost of similar (*size and type*) brand name food items presently allowed by the State.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- b. Private label food items cannot cost more than the current average cost of similar (*size and type*) brand name food items presently allowed by the State.
- c. WIC food items should encourage economical shopping habits.
- d. Increased packaging of items increases food costs, therefore packaging is a consideration. e.g.—Individually packaged cheese slices are more expensive than bulk cheeses due to their wrappings.

IV. Least expensive brand

- a. Any wholesale, private label, or other brands that have the same price or cost less.
- b. Must be authorized by WIC and stocked by the vendor.
- c. See the Vendor Management Section for further detail.

V. Cold cereals

- a. The first 3 brand name cold cereals selected by the Participant Survey will be added to the WIC Authorized Food List, as long as they meet all other Federal and State criteria.
- b. Package sizes less than 12 ounces are not allowed, except those sizes needed for a homeless food package.

VI. Availability

- a. WIC products must meet at least a 70% distribution and availability rate throughout the State for all brand name food items.
- b. Items that are private label must be stocked by 70% of the stores affiliated with these specific brands.

VII. Acceptability

- a. Periodic statewide Participant Surveys are conducted to assess acceptability of WIC products.
- b. Products with less than 2% selection by WIC participants are not accepted.

VIII. Exceptions

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. Products needed for a homeless food package.
- b. Specific nutrition risk factor.
- c. Special food products.
- d. Special conditions due to unsanitary water.
- e. Participants who have low comprehension of preparing food items or formula.
- f. Items needed to serve WIC participants in an expedient manner.

IX. Utah WIC Program Authorized Food List

- a. Known as the “WIC food card”.
- b. Pictorially shows the foods authorized by the Utah WIC Program.
- c. Given to all WIC participants to help them know which foods are WIC approved.
- d. Is an aid to assist clients in identifying and purchasing WIC approved foods.

X. Special Food Letter

- a. Required when a participant needs to purchase any food item that is not listed on the Utah WIC Program Authorized Food List card.
- b. Must be presented to the vendor at the time of the item's purchase.
- c. Gives the participant permission to purchase the food item(s) specified.
- d. It also tells the vendor that the Utah WIC Program has authorized this special purchase.
- e. See section N for a sample of the “Special Food Letter”.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

H.2. Definitions of Authorized WIC Foods

In this subsection

The following topics are included in this subsection.

Topic	See Page
Standard formulas	7
Primary contract infant formula	7
Non-contract infant formulas	8
Hydrolysates	8
Special formulas	8
Low-iron formula	9
Eggs	9
Cereals—Adult and Infant	10
Juice	10
Milk	11
Milk substitutes	11
Lactose-reduced milk	12
Acidophilus milk	12
UHT milk	13
Evaporated milk	13
Non-fat dry milk	13
Meyenberg Goat's Milk	13
Buttermilk	14
Cheese	14
Peanut Butter	15
Legumes	15
Carrots	15
Tuna	15

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Breastfeeding

Breastfeeding is the normal, recommended and preferred method of infant and child feeding.

Procedure

- I. During the prenatal and postnatal period and prior to issuance of formula, women should be informed about the risks of not breastfeeding and the risks associated with the use of formula.

Policy: Infant Formula

WIC infant formula refers to iron-fortified formula which, other than water, does not require the addition of any ingredient. It is a complete food for an infant. Infant formula means a “food which purports to be or is represented for special dietary use solely as a food for infants by reason of its simulation of human milk. It must also be suitable as a complete or partial substitute for human milk.” (P.L. 96-359, the Infant Formula Act of 1980, enacted September 26, 1980, and amended by the Drug Enforcement, Education, and Control Act of 1986.)

Procedure

- I. Standard formulas
 - a. Powdered formula—most common, least expensive form of formula
 - b. Concentrated formula
 - c. Ready-to-feed
 - d. See the food package in [this section](#) for formula issuance and ordering policies
- II. Primary contract infant formula
 - a. Under the Child Nutrition Act of 1966, formula for all WIC Programs is selected via a competitive, sealed bidding process. Competitive bidding is defined as a process under which the State selects a single source offering the lowest price. The infant formula company who offers the lowest net wholesale cost or the highest rebate per unit of infant formula, is awarded the contract. The formula company selected acts as the State’s single source, providing all infant formula in the forms and types originally spelled out in the invitation for bids

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- b. The Utah WIC Program presently has a rebate agreement to provide the contract formulas **Enfamil Lipil, Prosobee Lipil, Lactofree Lipil, and Gentlease Lipil.**
- c. All infants in the Utah WIC Program who are on a standard formula shall receive the primary contract formula, unless a non-contract formula is medically warranted. **Enfamil Lipil** is the standard feeding for term babies who are not breastfed.
- d. Low iron formula is not allowed. (*See definition of low iron.*)

III. Non-contract infant formulas

- a. Non-contract formulas include products designed for normal infant feeding. These products must contain at least 10 mg of iron per liter of formula at standard dilution. Standard dilution is 20 kcals per fluid ounce.
- b. Non-contract formulas include products whose manufacturers do not have a cost-containment contract with the Utah WIC Program
- c. **Similac Advance with Iron, Isomil Advance (Ross), Good Start Supreme, Good Start Supreme Soy DHA/ARA(Nestle),** and store brands (Wyeth Ayerst) are non-contract formulas

IV. Hydrolysates

- a. **Nutramigen Lipil, Pregestimil, Alimentum Advance** are special formulas made for easy digestion and are less likely to cause allergies

V. Special formulas (non-contract)

- a. Breastfeeding must be supported and encouraged, unless medically contraindicated.
- b. Special formulas are formulas that are used in lieu of standard formulas to manage some of the medical conditions listed below
 - i. prematurity
 - ii. metabolic disorders
 - iii. inborn-errors of metabolism
 - iv. gastrointestinal disorders
 - v. malabsorption syndromes
 - vi. protein allergies
 - vii. failure-to-thrive (physician diagnosed)
 - viii. asthma

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- ix. organic heart disease
 - c. Refer to the “Product Guide” for in-depth detail regarding special formulas and their use.
- VI. Metabolic formulas
- a. Those formulas required to manage inborn-errors of metabolism such as phenylketonuria
 - b. Some, *but not all* of the metabolic formulas include **Lofenalac, Phenyl-free, Analog XP, Phenex 1, Phenex 2, Maxamaid XP, Periflex**, and others as approved and/or determined by the State office in conjunction with the University of Utah’s Metabolic Clinic
 - c. See the “Product Guide” for other metabolic formulas, as well as instructions regarding use and ordering
- VII. Other special medical/nutritional products and formulas
- a. Consult the “Product Guide” for in-depth detail regarding special medical and formula products and their use
- VII. Low-iron formula
- a. Only iron-fortified formula is authorized for healthy infants in the Utah WIC Program
 - b. Exceptions
 - i. USDA recognizes the medical condition hemolytic anemia as necessitating the restriction of iron intake through the use of low-iron formula
 - c. See [this section](#) regarding formula issuance and ordering policies.
 - d. See [this section](#) for the definition of Hemolytic anemia.

Policy: Eggs

- I. [Medium](#) or large, white only, in the least expensive brand are allowed.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. Brown eggs, hard-boiled, deli, low in saturated fat or cholesterol-reduced, or any other specialty eggs are not allowed.
- b. They must be the least expensive brand.

Policy: Cereal

- I. Adult and infant cereals refer to any combination of the allowed cereals, hot or cold, listed on the Utah WIC Program Authorized Food List.
 - a. Total cereal must be equal to or less than the total amount printed on the WIC voucher.
 - b. The cereals may not have more than 17.80 grams of sucrose and other sugars per 100 grams of dry cereal (i.e.--5 grams per ounce).
 - c. Infant cereal refers to dry infant cereal without the addition of fruit or formula.
 - d. Infant cereal must have at least 45 mg of iron per 100 gms of dry cereal.
 - e. Adult cereal must have at least 28 mg of iron per 100 gms of dry cereal.

Policy: Juice

- I. Juice refers to any of the allowed juices listed on the Utah WIC Program Authorized Food List.
 - a. Juice refers to 12 ounce, frozen juice or canned 46 oz tomato or vegetable juice. The full-strength tomato or vegetable juices are allowed in the following brands only: Campbell's, Great Value, or V-8 (unless canned fruit juice is indicated – see page 18).
 - b. Juice may also refer to 11.5 or 12 oz shelf stable juice. Refer to the Utah WIC Program Authorized Food List for a listing of specific authorized juices.
 - c. The juice must be 100% natural juice with fortification of 30 mg of vitamin C per 100 ml of reconstituted juice.
 - d. Juices with added sugar or sweeteners are not allowed.
 - e. Fruit drinks or cocktails, nectars, freshly squeezed, or any other fruit drink combinations are not allowed.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Milk

- I. **Milk** refers to any of the allowed milks listed on the Utah WIC Program Authorized Food List. All milk authorized by the Utah WIC Program must meet the FDA's standards of identity for milk.
 - a. Milk refers to the least expensive brands of the following types of milks:
 - i. Fat-free,
 - ii. Non-fat,
 - iii. Skim,
 - iv. Lowfat,
 - v. Light,
 - vi. Reduced-fat, and
 - vii. Whole.
 - b. Whole milk is recommended until the age of two.
 - c. Reduced-fat (2%, 1%) or skim milk may be issued for all participants over 2 years of age, except:
 - i. Underweight,
 - ii. Failure to thrive, or
 - iii. Pregnant women with inadequate weight gain.
 - d. The milk must be pasteurized and fortified with 2000 IU Vitamin A per quart and 400 IU of vitamin D per quart.
 - e. Flavored, chocolate, organic milks; eggnog and any other special milk beverages are not allowed.
 - f. It must be the least expensive brand.
 - g. Milk is **not approved** for infants.
- II. **Other allowable milks:**
 - a. Other allowable milks must meet the FDA's standards of identity of milk. They include:
 - i. Lactose-reduced milk
 - ii. Acidophilus cow's milk
 - iii. UHT milk
 - iv. Evaporated milk

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- v. Non-fat dry milk
- vi. Meyenberg Goat's milk
- vii. Buttermilk
- viii. Natural pasteurized cheeses
- ix. Rice milks, soy milks and other non-dairy substitutes are not allowed.

III. Lactose-reduced milk

- a. Lactose-reduced milk may be authorized for:
 - i. women, and children over one year of age
 - ii. *only when* its need has been determined with a medical diagnosis (can be self-reported)
 - iii. When it is documented in the participant's chart that there is a specific indication for use such as milk intolerance, chronic antibiotic therapy, etc.
- b. Lactose-reduced milks need to be pasteurized and fortified with 400 IU of vitamin D and 2000 IU vitamin A per quart.
- c. Lactose-reduced milks are available in formulations of 50%, 70%, and 100% lactose reduction.
- d. Lactose-reduced milks are available in non-fat, 1% lowfat, and 2% lowfat concentrations (quarts) and whole (half-gallons).

IV. Acidophilus cow's milk

- a. Acidophilus cow's milk is fermented milk that contains less lactose than unfermented milk.
- b. It is indicated for children over the age of 2 and adults:
 - i. Who may have lactose intolerance, but are not allergic to cow's milk protein.
 - ii. Who are on continuous antibiotic therapy.
- c. The CPA must document the specific indication for use in the participant's file.
- d. Acidophilus cow's milk is pasteurized and fortified with 400 IU of vitamin D and 2000 IU vitamin A per quart.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- e. It must be the least expensive brand.

V. UHT milk

- a. UHT milk refers to 2% or non-fat shelf milk that requires no refrigeration.
- b. It is authorized only when it has been determined and documented that there is:
 - i. a scarcity of refrigerated milk,
 - ii. poor refrigeration facilities in the home, or
 - iii. milk contamination emergency.
- c. It must be fortified with 400 IU of vitamin D and 2000 IU vitamin A per quart.
- d. It must be the least expensive brand.

VI. Evaporated milk

- a. Evaporated milk—skim, lowfat, or whole—is a canned cow's milk product that has been concentrated by removing half of the water.
- b. It must be fortified with 400 IU vitamin D per reconstituted quart.
- c. Lowfat evaporated milk must be fortified with 5040 IU of vitamin A.
- d. Nonfat evaporated milk must be fortified with 4000 IU of vitamin A.
- e. It must be the least expensive brand.
- f. It is **not approved** for infants.
- g. It is approved for children and adults.

VII. Non-fat dry milk

- a. Non-fat dry milk can be substituted at the rate of 1 pound per 5 quarts of whole, fluid milk.
- b. It must be fortified with 400 IU vitamin D and 2000 IU vitamin A per reconstituted quart
- c. It must be the least expensive brand

VIII. Meyenberg Goat's Milk

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. Meyenberg Goat's Milk refers to a form of goat's milk that has been fortified with folic acid and vitamin D to 25% of the RDA.
- b. It is approved for children and adults.
- c. It is NOT APPROVED for infants.
- d. Its use requires:
 - i. A physician's diagnosis of cow's milk intolerance (can be self-reported).
 - ii. CPA authorization.
- e. This must be documented in the participant's file.
- f. It must be fortified with 400 IU of vitamin D and 2000 IU vitamin A per quart.
- g. Consult the "Product Guide" for further detail regarding goat's milk.

IX. Buttermilk

- a. Buttermilk must be authorized by a CPA
- b. It must be the least expensive brand

Policy: Cheese

- I. Cheese refers to any of the allowed cheeses listed on the Utah WIC Program Authorized Food List.
 - a. Types of cheese allowed are medium, mild, or sharp cheddar, mozzarella, Monterey Jack, Colby, Colby Jack, Longhorn, and Longhorn-Colby.
 - b. It must be domestic, bulk, and pasteurized only.
 - c. It must be the least expensive brand.
 - d. Slices, specialty, imported, marbled, cheese foods, shredded, or spreads **are not allowed**.
 - e. If more than one package is purchased, total weight cannot be more than weight printed on the check.
 - f. One pound of cheese/month can be substituted for 3 quarts of milk/person.
 - g. Up to 4 pounds of cheese may be substituted for milk for a participant when the CPA documents (*i.e.—food package tailoring*) that this is indicated for

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

nutritional reasons.

- h. Up to one pound of cheese may be substituted for milk without food package tailoring.
- i. Additional cheese may be issued with a physician's diagnosis of "lactose intolerance." The CPA must document this food package tailoring in the participant's file.

Policy: Peanut butter

- I. Peanut butter refers to unflavored, smooth, crunchy, or extra-crunchy in 18-ounce containers only.
 - a. Lowfat, non-fat, honey or jelly additives, or peanut spreads are **not allowed**.
 - b. It must be the least expensive brand.

Policy: Legumes

- I. Legumes refer to any dried beans/peas allowed on the Utah WIC Program Authorized Food List.
- II. This group refers to dried peas, beans and/or legumes in one pound packages.
 - a. It includes lentils, navy, kidney, red, pinto, Great Northern, lima, split peas, black-eyed peas, soy beans, mung beans, black beans, garbanzo or chick peas.
 - b. Bean soup mixes **are not allowed**.

Policy: Carrots

- I. Carrots in a 2-pound fresh, pre-packaged bag are allowed.
- II. Canned, frozen, loose, or baby carrots **are not allowed**.

Policy: Tuna

- I. Tuna refers to 6 1/8-ounce cans—water or oil packed.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- II. Albacore, fancy tuna, fancy albacore, diet, low-salt, canola or hickory smoked are not allowed.

H.3. Definitions of Special Foods

Policy: Thickened juices

- I. Thickened juices are formulated specifically for the management of swallowing disorders (i.e.-dysphagia). Thickened juices allow safer swallowing of liquids by minimizing the risk of choking and aspiration. They assist in preventing dehydration.
- II. Thickened juices meet 100% of the Daily Value for vitamin C in 4 fluid ounce servings.
- III. Thickened juice should be used only under medical supervision.
 - a. A prescription is required for use and issuance, and must be authorized by an RD.
 - b. Call the State agency for the food package number. Consult the “Product Guide” for in-depth detail regarding ordering and issuance.
 - c. The participant needs to receive a Special Food Letter from the issuing agency.

Policy: Calcium-fortified juice

- I. Calcium fortified juice
 - a. Is **NOT** routinely issued.
 - b. Is **NOT** allowed for infants .
 - c. Is allowed in food packages II-VII for children and women with lactose-intolerance or low milk intake.
 - d. Must be authorized by a CPA.
 - e. Must have indication for use documented in the participant’s chart. Participant needs to receive a *Special Food Letter*.

Policy: Canned fruit juice

- I. Canned fruit juice:
 - a. Is **NOT** routinely issued.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- b. Must be authorized by a CPA.
 - c. Participant needs to receive a *Special Food Letter*.
 - d. Must have indication for use documented in the participant's chart, such as:
 - i. unsafe water supply
 - ii. guardian is unable to dilute
 - iii. limited freezer space
- II. Allowable canned juice:
- a. Must be authorized by a CPA
 - b. A list of allowed juices must be given
 - c. A *Special Food Letter* must be issued
 - d. Allowable juices include:
 - i. 46 ounce juice-cans, plastic or glass bottles
 - ii. Any brand orange juice – least expensive brand
 - iii. Any brand grapefruit juice – least expensive brand
 - iv. Any brand pineapple juice– least expensive brand
 - v. Apple: Seneca (red label), Treetop, Old Orchard, Western Family or Smiths 100% Apple juice
 - vi. Cranberry: Northland Traditional Cranberry 100%
 - vii. Grape: Seneca, Old Orchard, Western Family, Welch's 100% purple or white

Policy: Low-fat cheese

- I. Low-fat cheese:
 - a. Is **NOT** routinely issued.
 - b. May be issued for nutritional reasons.
 - c. Must be authorized by a CPA.
 - d. Must have indication for use documented in the participant's chart. Participant must receive a *Special Food Letter*.

Policy: Canned beans

- I. Canned beans:

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. Are **NOT** routinely issued.
- b. Must be authorized by a CPA.
- c. May substitute for dried beans and eggs for a homeless participant. "Pork and beans" are not allowed.
- d. Participant needs to receive a *Special Food Letter*.
- e. Must have indication for use documented in the participant's chart.

Policy: Other items

- I. Other items:
 - a. Are **NOT** routinely issued.
 - b. Must meet the nutritional requirements to be WIC eligible.
 - c. May be issued for medical/nutritional reasons if the item is not on the food card but does meet the WIC specifications.
 - d. Must be authorized by a CPA.
 - e. Must have indication for use documented in the participant's chart.
 - f. Participant needs to receive a *Special Food Letter*.
 - g. Call the State to verify that the product is approved.

H.4. Products Not Authorized for WIC

Policy

The following section outlines products not allowed on the WIC Program.

Procedure

- I. Products used solely for the purpose of weight management in women, infants or children are not allowed.
- II. A high-calorie product *may be appropriate* for a participant who is debilitated due to special needs, disease, frequent illness, or medical therapy.
 - a. Refer to the “Product Guide” for further detail and instruction regarding use.
- III. Low-iron formula
- IV. Oral electrolyte solutions
- V. Hospital formulas
- VI. Parenteral nutritional products
- VII. Products with artificial sweeteners
- VIII. Raw or non-pasteurized milk
- IX. Dairy products such as yogurt, half & half, flavored or chocolate milk and drinks, sweetened condensed milk, organic milk, eggnog, any other specialty milk beverages that have been highly fortified, engineered, or processed.
- X. Soy milk, rice milk, or other non-dairy substitutes.
- XI. Milk for infants—cow’s milk and goat’s milk **are not allowed** for infants less than 1 year.
- XII. Cheese—slices, shredded, specialty, imported, marbled, cheese foods or spreads.
- XIII. Hard-boiled, deli, low in fat or cholesterol, or any other “specialty” eggs.
- XIV. Fruit drinks or cocktails, freshly squeezed, or any other “specialty” fruit drink combinations.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- XV. Low-fat or non-fat peanut butter, peanut butter spreads, peanut butter with honey or jelly additives, or any other “specialty” peanut butters.
- XVI. Bean soup mixes.
- XVII. Albacore, fancy, fancy albacore, diet, low-salt, canola or hickory-smoked tuna or any other “specialty” tunas.
- XVIII. Canned, frozen, loose or baby carrots.

H.5. WIC Food Package

Policy

All WIC food items issued to participants are organized in food packages specific to the infant's/child's age, WIC category and their specific nutritional risk and dietary needs. The Utah WIC Program utilizes computerized food vouchers that are generated and issued at the clinic site. A food voucher is a check that is issued to a WIC participant by the local clinic to purchase the WIC supplemental foods prescribed for that participant.

The Utah WIC "Food Packages" book is designed around the Federal WIC Regulations which stipulate seven categories of food packages. In Utah, the infant 4-12 month food package category is subdivided into two groups, for a total of 8 categories of food packages. The Utah WIC "Food Packages" book contains the following food package groups:

- II. Food Package I: Infants, Birth through 3 Months
- III. Food Package II: Infants, 4 Months through 5 Months
- IV. Food Package II: Infants, 6 Months until 1 Year of Age
- V. Food Package III: Women and Children with Special Dietary Needs
- VI. Food Package IV: Children 1-5 years of age
- VII. Food Package V: Pregnant and Breastfeeding (Non-Exclusively) Women
- VIII. Food Package VI: Postpartum Women
- IX. Food Package VII: Breastfeeding Enhanced for Exclusively Breastfeeding Women

There are many combinations of food items to choose from within each food package group. The participant is "*prescribed*" a food package(s) at the time of certification. The food package codes are entered into the computer so the participant can have the appropriate food items printed on their vouchers. In the Utah WIC program all of the combinations of food packages available are listed in the "Food Packages" book.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

In this subsection

This subsection contains the following topics.

Topic	See Page
H.5.1. Food Packages I, II, and III	
Food Package I, Infants, Birth - 3 Months	24
Food Package II, Infants, 4-5 Months	24
Food Package II, Infants, 6-12 Months	25
Food Package III, Women and Children with Special Dietary Needs	25
Maximum Amounts of Formula Allowed in the Federal Regulations	26
Maximum Food Allowed	26
Use of Powdered Formula	29
Use of Concentrate Formula	29
Use of Ready-To-Feed Formula	29
Formula Changes	30
Formula Prescription and Documentation Requirements	32
Exceptions for Use of Low Iron Formula	40
Prescriptions	40
H.5.2. Food Packages IV, V, VI and VII	
Food Package IV	42
Food Package V	42
Food Package VI	42
Food Package VII	43
Maximum Amounts Allowed	44
Milk/Cheese Substitutions	45
Using Frozen and Single Strength Juices	46
Alternating Peanut Butter and Legumes	46
Food Packages for Breastfeeding Women	47
Least Expensive Brand	47
Special Request Food Items	48

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy

Food Package I, Infants, Birth-3 months

Procedure

I. Iron-fortified Infant Formula

- a. Primary contract formulas: Enfamil Lipil, Lactofree Lipil, Prosobee Lipil, Gentlease Lipil
- b. Non-contract formulas: Milk-based and soy-based store brands, Good Start Supreme, Good Start Supreme Soy DHA/ARA, Similac Advance, Isomil Advance,
- c. Hydrolysates: Alimentum Advance, Nutramigen Lipil, Pregestimil
- d. Special formulas: See the “Product Guide” for more complete information about formulas allowed.

Policy

Food Package II: Infants, 4-5 months

Procedure

I. Iron-fortified infant formula

- a. Primary Contract formulas: Enfamil Lipil, Lactofree Lipil, ProSobee Lipil, Gentlease Lipil
- b. Non-contract formulas: Milk-based and soy-based store brands, Good Start Supreme, Good Start Supreme Soy DHA/ARA, Similac Advance, Isomil Advance
- c. Hydrolysates: Alimentum Advance, Nutramigen Lipil, Pregestimil
- d. Special formulas: See the “Product Guide” for more complete information about formulas allowed

II. Infant cereal

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy

Food Package II: Infants, 6-12 months

Procedure

I. Iron fortified infant formula

- a. Primary Contract formulas: Enfamil Lipil, Lactofree Lipil, Prosobee Lipil, Gentlease Lipil
- b. Non-contract formulas: Milk-based and soy-based store brands, Good Start Supreme, Good Start Supreme Soy DHA/ARA, Similac Advance, Isomil Advance
- c. Hydrolysates: Alimentum Advance, Nutramigen Lipil, Pregestimil
- d. Special formulas:
 - i. See the “Product Guide” for more complete information about formulas allowed.

II. Infant cereal

III. Adult fruit juice

Policy

Food Package III: Women and Children with special dietary needs. Formula intended for use as an oral feeding and prescribed by a physician.

Procedure

I. Iron fortified infant formula

- a. Primary Contract formulas: Enfamil Lipil, Lactofree Lipil, Prosobee Lipil, Gentlease Lipil
- b. Non-contract formulas: Milk-based and soy-based store brands, Good Start Supreme, Good Start Supreme Soy DHA/ARA, Similac Advance, Isomil Advance
- c. Hydrolysates: Alimentum Advance, Nutramigen Lipil, Pregestimil
- d. Special Formulas

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- i. See the “Product Guide” for more complete information about formulas allowed.
- II. Adult or infant cereal
- III. Adult Juices

Policy: Maximum amounts of formula allowed in the Federal Regulations

Formula Packaging	Food Packages I and II	Food Packages III
Powdered	8 pounds	9 pounds
Ready to Feed	806 ounces	910 ounces
Concentrate	403 ounces	455 ounces

Maximum amounts allowed

Food Packages I and II Formula Can Sizes and Maximum Amounts Allowed

Formulas	16 oz powder	14.3 oz powder	12.9 oz powder	12.8 powder	12 oz powder	13 oz concentrate	32 oz ready-to-feed
Enfamil, ProSobee		8 cans				31 cans	25 cans Prosobee only
Enfamil Lipil Prosobee Lipil Lactofree Lipil (Primary Contract)			9 cans			31 cans	25 cans
Enfamil Gentlease Lipil					10 cans		
Store Brand Formulas (Milk & Soy)	8 cans						
Similac Isomil			9 cans			31 cans	25 cans
Similac Advance Isomil Advance, Similac Lactose Free Advance			9 cans			31 cans	25 cans
Good Start Supreme Good Start Supreme w/ DHA&ARA					10 cans	31 cans	25 cans
Enfacare Lipil				10 cans			25 cans (Enfamil AR)
Enfacare AR Lipil			9 cans				
Nutramigen Lipil	8 cans					31 cans	25 cans

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Alimentum Advance	8 cans						25 cans
Pregestimil	8 cans						

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Food Package III Formula Can Sizes and Maximum Amounts Allowed

Formulas	16 oz powder	14.3 oz powder	12.9 oz powder	12oz powder	13 oz concentrate	32 oz ready-to-feed
Enfamil Prosobee		10 cans			35 cans	28 cans
Enfamil Lipil Prosobee Lipil Lactofree Lipil (Primary Contract)			11 cans		35 cans	28 cans
Enfamil Gentlease Lipil				12 cans		
Store Brand Formulas (Milk and Soy)	9 cans					
Similac Isomil Similac Lactose Free			11 cans		35 cans	28 cans
Similac Advance Isomil Advance Lactose Free Advance			11 cans		35 cans	
Good Start Supreme, Good Start Supreme w/ DHA&ARA				12 cans	35 cans	28 cans
Nutramigen Lipil	9 cans				35 cans	28 cans
Alimentum Advance	9 cans					28 cans
Pregestimil	9 cans					

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Food Packages I, II and III Cereal and Juice Maximum Amounts Allowed

Description of the items	Food Packages I and II	Food Packages III
Adult juices, frozen concentrate (reconstituted). Preferred form for most WIC participants, or...	96 ounces (2-12 oz cans)	144 ounces (3-12 oz cans)
...Adult juices, single strength (<i>must document why it is used</i>)	92 ounces (2-46 oz cans/bottles)	138 ounces (3-46 oz cans/bottles)
Infant cereals, 8 or 16 oz boxes	24 ounces	36 ounces
Adult cereals	None	36 ounces

Policy

Powdered formula is the standard form of formula to be issued to WIC participants. Documentation is required when using ready-to-feed and concentrated forms of formula.

Procedure

- I. Issuance criteria for concentrated formula
 - a. The CPA must determine there is a need for the concentrated formula; or
 - b. The product is only available in concentrated form
- II. Issuance criteria for ready-to-feed formula
 - a. The CPA must determine an unsanitary or restricted water supply
 - b. The CPA must determine there is poor refrigeration
 - c. There is a caretaker who has difficulty correctly diluting concentrated or powdered formula
 - d. The product is only available in RTF form

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- e. A prescription states RTF is necessary or intolerance to formula other than RTF is diagnosed by the medical provider as self reported by applicant/participant/caregiver; or as reported or documented by a physician, or someone working under physician's order.

Policy: Formula Changes

Procedure

IF...	THEN...
A healthy, full-term infant demonstrates symptoms of intolerance to the primary contract formula.	Refer to the primary care provider. The participant must obtain a complete prescription if a non-contract formula is warranted.
A healthy, full term infant received a prescription for a non-contract formula because of symptoms of intolerance and the prescription is now expired.	Issue the primary contract formula. If a non-contract formula is still needed, refer the participant to the primary care provider for a complete prescription.
An infant/child is <u>high risk</u> and has been on a special formula (such as a premature, metabolic or hydrolysate formula) and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current prescription for the non-contract formula has not expired.	Refer to the primary care provider. Explain to the participant that the prescription must be honored for the specified time frame. The participant must contact the primary care provider and obtain written approval for the primary contract formula before it is issued.
An infant/child is <u>high risk</u> and has been on a special formula (such as premature, metabolic or hydrolysate formula) and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current prescription for the non-contract formula has expired	The CPA or RD must document in the computer that the parent/caretaker states the MD gave permission to transition to a primary contract formula. Issue primary contract formula.
An infant/child is <u>not high risk</u> and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current	Issue primary contract formula.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

prescription for the non-contract formula has expired.	
An infant/child is <u>not high risk</u> and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current prescription for the non-contract has not expired.	The CPA or RD must document in the computer that the parent/caretaker states the MD gave permission to transition to a primary contract formula. Issue primary contract formula.

Policy: Use of a combination of different forms of formula

Food packages I, II and III can include a combination of different physical forms of formula and medical foods (i.e., liquid and powder). If it is necessary to combine different physical forms of infant formula, exempt infant formula or medical foods, the monthly maximum reconstituted allowance and yield provided by the combination of formulas cannot exceed the 806 reconstituted fluid ounces provided by liquid concentrate in Food Packages I and II, or the 910 reconstituted fluid ounces provided by liquid concentrate in Food Package III.

Procedure

- I. Medical documentation is required.
- II. Consult a dietitian at the State Office to determine the Food Package.

Policy: Religious eating pattern exception

Local agencies may issue a non-contract formula that meets the definition of infant formula without medical documentation in order to meet religious eating patterns. However, if the non-contract brand infant formula does not meet the definition of infant formula, medical documentation must be provided. Documentation of the basis of the substitution must be kept in the participant's file.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Formula Prescription and Documentation Requirements

The table below indicates additional prescription documentation needed, and who may issue the product.

Formula Issuance

Primary Contract Brand Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Enfamil Lipil (Standard infant formula)	All CPAs	No prescription needed for infants Food Pkg III: Prescription and care plan required for children > 1 year and women Prescription valid for a maximum of 6 months	<u>Procedure:</u> All infants currently on a non-contract, milk-based formula must first try Enfamil Lipil if there is no prescription for a non-contract formula and no indication of formula intolerance to Enfamil Lipil. Contact primary care provider to determine the length of time Enfamil is medically required after 1 year of age. Discuss other formula options and obtain a prescription if necessary. <u>Indications for use:</u> If an infant on primary contract formula shows symptoms of intolerance resulting from improper preparation, safety, sanitation or feeding practices, provide appropriate counseling and referral. Keep on Enfamil Lipil if not at medical/nutritional risk and follow-up.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Primary Contract Brand Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Enfamil ProSobee Lipil	All CPAs	<p>No prescription needed for infants</p> <p>Food Pkg III: Prescription and care plan required for children > 1 year</p> <p>Prescription valid for a maximum of 6 months</p>	<p><u>Indications for use:</u></p> <ul style="list-style-type: none">-For vegetarian families where animal protein formula is not desired-For management of cows milk allergy, galactosemia, primary lactase deficiency, or recovery phase of secondary lactose intolerance-Where sensitivity to lactose may be suspected due to GI symptoms including: moderate to severe spitting up, diarrhea, abdominal cramping, bloating, excessive gas and/or fussiness-For a potentially allergic infant who has not yet shown manifestations of allergy (infants with family history of atopy)-These infants should be closely watched for allergy to soy proteins and/or corn-Not recommended for dietary management of documented clinical allergic reactions to soy protein formula-Contact primary care provider to determine the length of time Prosobee Lipil is medically required after 1 year of age. Discuss other formula options and obtain a prescription if medically warranted.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Primary Contract Brand Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Enfamil Lactofree Lipil	All CPAs	<p>No prescription needed for infants</p> <p>Food Pkg III: Prescription and care plan required for children > 1 year</p> <p>Prescription valid for a maximum of 6 months</p>	<p><u>Indications for use:</u></p> <ul style="list-style-type: none">-For primary lactase deficiency or for the recovery phase of a secondary lactose intolerance.-For GI symptoms of lactase deficiency including: moderate to severe spitting up, diarrhea, abdominal cramping, bloating, excessive gas and/or fussiness-Demonstrated improved tolerance over standard milk-based formula.-Not recommended for the dietary management of documented clinical allergic reaction to cow's milk protein or galactosemia.-Contact primary care provider to determine the length of time Lactofree Lipil is medically required after 1 year of age. Discuss other formula options and obtain a prescription if necessary.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Primary Contract Brand Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Enfamil Gentlease Lipil	All CPAs	No prescription needed for infants Food Pkg III: Prescription and care plan required for children > 1 year Prescription valid for a maximum of 6 months	<u>Indications for use:</u> -This product is categorized as a routine infant formula. -Contains partially broken down cow's milk protein and reduced lactose (1/4 the lactose of a full lactose routine milk-based formula, with the remainder of carbohydrate from another source).

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Non-Contract Brand Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Standard Infant Formulas Milk-Based: Similac Advance Good Start Supreme Store Brands Soy-Based: Isomil Advance Good Start Supreme Soy DHA/ARA Store Brands	All CPAs Consult WIC RD for nutritional guidance and technical assistance	Prescription required CPA or RD to initial and date prescription acknowledging diagnosis & formula/product prescribed CPA must complete care plan, including an assessment and plan. Prescription is valid for maximum of 6 months *Note: Non-contract formulas will be allowed when medically indicated with a prescription. Each participant receiving non-contract formula must be closely monitored.	<u>Procedure:</u> -Provide participant with appropriate counseling (identify the non-contract item) to the participant for use with store purchase -RD to consult with primary care provider to address the length of time non-contract formula is medically required -Discuss other formula options with the primary care provider and obtain a prescription for non-contract formula, as medically warranted <u>Indications for use:</u> -Medically diagnosed gastrointestinal disorders (ICD-9 defined) which place the infant/child at nutritional risk -High risk infants/children (i.e. preterm, FTT, surgery, etc.) who are currently consuming non-contract formula and the prescriptive authority determines switching formulas may be detrimental to their nutritional/medical progress

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Exempt Infant Formulas	Who May Issue	Prescription/ Documentation	Issuance Procedure
Hydrolysates Nutramigen Lipil Pregestimil Alimentum Advance <i>(See the "Product Guide" for more information)</i>	All CPAs Consult WIC RD for nutritional guidance and technical assistance	Prescription required CPA or RD to initial and date prescription acknowledging diagnosis & formula/product prescribed A Care plan, must be completed. A RD is responsible to review and approve all documentation only in high risk cases Prescription is valid for maximum of 6 months	<u>Procedure:</u> -Provide participant with counseling -RD to consult with primary care provider to address the length of time non-contract formula is medically required -Discuss other formula options with the primary care provider and obtain a prescription for non-contract formula, as medically warranted <u>Indications for use:</u> -When a hypoallergenic formula is indicated (e.g. multiple allergies, sensitivity to intact milk protein, or to soy protein) -With persistent diarrhea, GI disturbances, etc.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Exempt Infant Formulas and Medical Foods	Who May Issue	Prescription/ Documentation	Issuance Procedure
Special Formulas: all other metabolic or medical/ nutritional products <i>(See the "Product Guide" for more information.)</i>	RD authorization required RD must be accessible during clinic hours	Prescription required CPA/RD to initial and date prescription acknowledging diagnosis and formula/product prescribed A Care plan must be completed. RD is responsible to review and approve all documentation. Prescription valid for 6 months Exception: All Premature Formula and Human Milk Fortifier must be prescribed and issued monthly. Enfamcare and NeoSure can be vouchered bimonthly	<u>Procedure:</u> -Voucher the special formula/product if there is a food package available (if it is available at the grocery store) OR -For all other products, send your order electronically to the State WIC office (see this section for instructions) -Document : *name and amount of product ordered *vouchering period for which this product is given *when product was ordered and when it is expected in the clinic *when participant is expected to pick up the product *participant must sign for product <u>Indications for use:</u> Issuance is acceptable for medical conditions including: failure to thrive, organic heart disease, severe GI disorders, malabsorption syndromes, metabolic disorders, inborn errors of metabolism, and/or medical conditions resulting from prematurity, etc. Note: Metabolic clinic patients are followed by RD at University of Utah

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Formula Issuance, cont'd

Non-Contract Formula	Who May Issue	Prescription/Documentation	Issuance Procedure
Low-Iron Formulas	State approval required	<p>Approved with a prescription for specific, approved diagnosis (hemolytic anemia) (see this section for definition)</p> <p>Care plan, including an assessment and plan, must be completed. RD is responsible to review and approve all documentation. (See Section I)</p> <p>CPA/RD to initial prescription acknowledging diagnosis and formula/product prescribed</p> <p>Monthly issuance only</p>	<p><u>Procedure:</u></p> <ul style="list-style-type: none"> -Approval from the State WIC RD is required prior to issuing any low-iron formula to a participant -Document: <ul style="list-style-type: none"> *diagnosis (reason for low iron formula) *received state approval *food package given -A letter describing the Utah WIC Program policy on low iron formulas is available for local agencies to reproduce and distribute to any physicians in local areas who request low-iron formula for WIC participants using reasons that are not WIC approved -RD to consult with primary care provider to address the length of time low-iron formula is medically required, as well as any formula transition issues -Provide instructions to participants as needed. <p><u>Indications for use:</u></p> <p>Low-iron formula will be authorized <i>on an individual basis</i> by the State WIC office for participants with specific approved diagnosis <i>The number of participants requiring low-iron formula is expected to be minimal</i></p>

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Exceptions for use of low iron formula

USDA recognizes that a small number of infants have medical conditions which necessitate restricting iron intake. These rare conditions include: Hemolytic anemia. Hemolytic anemia is associated with shortened red blood cell survival. Hemolytic anemia of the premature infant is usually resolved by the time the infant is discharged from the hospital. Use of low iron formulas is not a prescribed method of treatment for most infants/conditions. It is not authorized for diagnosis of vomiting, constipation and diarrhea of the healthy infant.

Procedure

- I. Classifications of hemolytic anemia include:
 - a. Congenital hemolytic anemia
 - b. Membrane defects - spherocytosis, stomatocytosis, pyropoikilocytosis, alliptocytosis
 - c. Hemoglobinopathies - sickle cell anemia, sickle syndromes, thalassemias, unstable hemoglobins
 - d. Enzyme defects
 - e. Acquired Hemolytic Anemias:
 - i. Autoimmune process
 - ii. Infections
 - iii. Toxins and drugs
 - iv. Thermal injury
 - v. Disseminated intravascular coagulation
 - vi. Hemolytic anemia syndrome
 - vii. Transfusion reactions

Policy: Prescriptions

Procedure

- I. Requirements
 - a. The brand name of the formula prescribed.
 - b. Medical diagnosis warranting the issuance of formula.
 - c. Length of time the prescribed formula is medically required.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- d. Signature and name of the requesting prescriptive authority.
 - e. Date.
 - i. Cannot be older than 60 days. The prescription is valid 6 months from the date the prescriptive authority writes it or for a shorter length of time if indicated on the prescription by the prescriptive authority.
 - f. If a prescription is provided for a high risk infant (FTT, prematurity and/or low birth weight) by the physician or prescriptive authority for the issuance of an electric breast pump, that prescription must be honored within two working days. Clinics need to have sufficient electric breast pumps to serve their population, especially high risk participants.
 - g. Medical documentation may be provided as an original written document or facsimile.
- II. Prescription not available at the clinic visit.
- a. CPA may receive the information prior to issuance by telephoning the prescriptive authority's office.
 - i. Document all information.
 - ii. Written confirmation of medical documentation must be obtained within two weeks.
 - iii. Written documentation must be kept on file with initial telephone documentation.
 - iv. Medical documentation over the telephone must only be used when absolutely necessary, on an individual basis, to prevent undue hardship to a participant or to prevent a delay in the provision of formula which would place the participant at increased nutritional risk.
- III. Additional prescription requirements
- a. If the prescription is missing any of the required elements, the CPA may obtain a complete prescription via fax.
 - b. If the prescription is complete, then the CPA must initial and date indicating that the prescription has met all of the requirements.
 - c. Prescriptions must be kept in the participant's file.
 - d. Issuing contract infant formulas for children over one year of age require a prescription.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Food Package IV

- I. Children 1 to 5 years of age
 - a. Eggs: 2 dozen
 - b. Cereal, adult or infant: 36 ounces
 - c. Juice, adult: Frozen, reconstituted, 288 ounces; or single strength (requires CPA approval/documentation) 276 ounces
 - d. Milk: 24 quarts
 - e. Cheese: 1 pound of cheese can be substituted for 3 quarts of milk
 - f. Peanut butter: 18 ounces or legumes: 1 pound

Policy: Food Package V

- I. Pregnant and Breastfeeding Women*
 - a. Eggs: 2 dozen
 - b. Cereal, adult: 36 ounces
 - c. Juice, adult: frozen, reconstituted, 288 ounces; or single strength (requires CPA approval/documentation) 276 ounces
 - d. Milk: 28 quarts
 - e. Cheese: 1 pound of cheese can be substituted for 3 quarts of milk
 - f. Peanut butter: 18 ounces or legumes: 1 pound

*See Food Package VII, Breastfeeding Enhanced, if the woman is not receiving WIC formula for her infant.

Policy: Food Package VI

- I. Postpartum Women
 - a. Eggs: 2 dozen
 - b. Cereal, adult: 36 ounces

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- c. Juice, adult: Frozen, reconstituted, 192 ounces; or single strength (requires CPA approval/documentation) 184 ounces
- d. Milk: 24 quarts
- e. Cheese: 1 pound of cheese can be substituted for 3 quarts of milk

Policy: Food Package VII

- I. Breastfeeding Enhanced: breastfeeding women who are not receiving any formula from WIC
 - a. Eggs: 2 dozen
 - b. Cereal, adult: 36 ounces
 - c. Juice, adult: Frozen, reconstituted, 336 ounces; or single strength (requires CPA approval/documentation) 322 ounces
 - d. Milk: 28 quarts
 - e. Cheese: 1 pound
 - f. Cheese: an additional 1 pound of cheese can be substituted for 3 quarts of milk
 - g. Peanut Butter: 18 ounces or Legumes: 1 pound
 - h. Carrots: 32 ounces
 - i. Tuna: 26 ounces

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Policy: Maximum amounts of foods allowed in the Federal Regulations

Food Packages IV, V, VI and VII Maximum Amounts Allowed

Food items	Food Package IV	Food Package V	Food Package VI	Food Package VII
Eggs, dozen	2 dozen	2 dozen	2 dozen	2 dozen
Cereal, adult or infant	36 ounces	36 ounces (Adult only)	36 ounces (Adult only)	36 ounces (Adult only)
Juice, Frozen concentrate (reconstituted) or...	288 ounces (6-12 oz cans)	288 ounces (6-12 oz cans)	192 ounces (4-12 oz cans)	336 ounces (7-12 oz cans)
Juice, ...Single strength (must have documentation as to the need)*	276 ounces (6-46 oz cans/bottles)	276 ounces (6-46 oz cans/bottles)	184 ounces (4-46 oz cans/bottles)	322 ounces (7-46 oz cans/bottles)
Milk or...	24 quarts	28 quarts	24 quarts	28 quarts
...Evaporated: 12 oz, or	26 cans	30 cans	26 cans	30 cans
...Nonfat dry milk: 1 lb per 5 qt fluid milk, 8 qt, 14 qt, 20 qt boxes or...	24 quarts (3-8 qt boxes or part fluid milk and part nonfat dry milk)	28 quarts (1-8 qt & 1-20 qt box or part fluid milk and part nonfat dry milk)	24 quarts (3-8 qt boxes or part fluid milk and part nonfat dry milk)	28 quarts (1-8 qt & 1-20 qt box or part fluid milk and part nonfat dry milk)
... Goat's milk, Lactose-reduced, UHT, and Acidophilus: qts,* or...	24 quarts	28 quarts	24 quarts	28 quarts
...UHT: 8 oz 3-packs,* or...	32 3-Packs	37 3-Packs	32 3-Packs	37 3-Packs
...Meyenberg Goat's Milk,* 12.0 oz cans, Evaporated	26 cans	30 cans	26 cans	30 cans

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

Food items	Food Package IV	Food Package V	Food Package VI	Food Package VII
Cheese	1 lb may be substituted for 3 qts of milk	1 lb may be substituted for 3 qts of milk	1 lb may be substituted for 3 qts of milk	1 lb may be substituted for 3 qts of milk
Cheese, 1 pound	Not applicable	Not applicable	Not applicable	1 pound
Peanut Butter/ Legumes: Peanut Butter or Legumes	18 ounces or 1 pound	18 ounces or 1 pound	None	18 ounces PB and 1 pound legumes or 2 pounds
Carrots	None	None	None	2 pounds
Tuna, 6 1/8 ounce cans	None	None	None	26 ounces (4 cans)

*Note: Use of this product requires documentation-see definitions of WIC foods.

Policy: Milk/cheese substitutions

- I. Issuance
 - a. One pound of cheese may be substituted for each 3 quarts of milk for any one person.
 - b. Two to 4 pounds of cheese may be substituted for milk to a participant when the CPA documents the nutritional necessity (see food package tailoring).
 - c. More than 4 pounds of cheese may be issued with a physician's diagnosis of "Lactose Intolerance." CPA to document this.
 - d. Six gallons of milk may be issued to a child between the ages of 1-5 years when the CPA documents a nutritional need. The following circumstances may warrant issuing additional milk:
 - i. an underweight child who would benefit from additional calories.
 - ii. a child who has increased caloric needs due to a hypermetabolic state or medical condition.
 - iii. a child who consumes a limited quantity or sources of protein and who could benefit from the additional protein in milk.
 - iv. a child who lives in a home where there is extreme poverty or food insecurity.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- v. a child who has a condition which interferes with calcium absorption or utilization.

Policy: Using frozen and single strength juices

- I. Issuance
 - a. For cost-saving reasons, frozen juice in 12-ounce cans, is the standard form of juice issued to WIC participants.
 - b. Canned, 46-ounce juice is allowed only for participants for whom there are concerns over inadequate freezer storage, sanitary water supply, or other special circumstances, **unless participant is receiving tomato or vegetable juice.**
 - c. Tomato or vegetable juice is only available in 46-ounce cans/**plastic containers.**
 - i. This is appropriate for reduced calorie and carbohydrate-restricted diets (gestational diabetes, IDDM).
 - d. Cranberry juice may be medically indicated for women diagnosed with UTIs.
 - e. Food package is considered a *tailored package* if canned juice is issued, **unless it is tomato or vegetable juice.**
 - i. The reason for tailoring must be documented by the CPA.

Policy: Legumes and Peanut Butter

- I. Issuance
 - a. When determined by the state office that cost savings are necessary, the local agencies will be informed by the Program Manager to issue legumes every month. Otherwise, the routine procedure is to alternate issuing legumes and peanut butter.
 - i. Exceptions are allowed under food package tailoring guidelines.
 - b. The food package is a *tailored package* if peanut butter is issued every month
 - i. The reason for tailoring must be documented by the CPA
 - c. Peanut butter may be issued more frequently than every other month for an underweight woman or child who would benefit from additional calories

Policy: Food Packages for breastfeeding women

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

I. Food Package V

- a. A woman can receive the breastfeeding food package if she is breastfeeding an infant, up to one year of age, on the average of at least once per day
- b. The woman may receive the full food package regardless of the number of breastfeedings per day

II. Food Package VII

- a. Designed for a woman breastfeeding an infant, up to one year of age, on an average of at least once per day and who is not receiving formula from the WIC program

Policy: “Least expensive brand”

I. Issuance

- a. For cost saving reasons, participants are required to purchase the least expensive brand of milk, cheese, juices, peanut butter and eggs
- b. When purchasing cheese or juice, participants should buy the *least expensive* brand of the *type of cheese or juice* they would like (i.e. Cheddar, Mozzarella, Monterey Jack, or Colby, Colby-Jack, Longhorn, Longhorn-Colby, orange, pineapple, or grapefruit juice)
- c. If more than one package of cheese is purchased, total weight cannot be more than the weight printed on the voucher
- d. The WIC participant can purchase the name brand if priced lower or is on sale. It must be the least expensive price.
- e. Exceptions to the least expensive brand policy must be for nutritional reasons and must be approved by the CPA.
 - i. The participant should be given a “*Special Food Letter*” stating what specific item(s) can be purchased.

Policy: Special request food items

I. Issuance

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. Participants are allowed to purchase food items listed on the food card. In certain nutritional conditions, special food items are occasionally indicated (see Food Package Tailoring Guidelines).
- b. Some special requested food items can be approved through the State office if they meet USDA Federal Regulation requirements.
- c. Most of these food items are listed in the “Product Guide” or in H.2. If there are any additional food items not identified in this manual, call the State WIC office.

H.6. Food Package Issuance

Policy: Food Package Prescription

I. Who can prescribe:

a. CPAs

- i. Prescribe authorized supplemental foods according to the participant's age, WIC category, nutritional need and current diet
- ii. May issue all food packages, except special formulas
- iii. CPAs can issue standard food packages, primary contract and non-contract milk-based and soy-based formulas and hydrolysate formulas.
- iv. All CPA 2 food package assignments must be reviewed and co-signed/approved by a CPA 1 unless the chart approval process has been waived according to the procedure outlined in **Section B.**
- v. Breastfeeding must be supported and encouraged

- b. **RDs** can issue all food packages including special formulas.

II. Assigning Food Packages I and II

a. Infants

- i. Within each food package group, standard infant formula food packages are available as well as specialized formula food packages for participants having special dietary needs
- ii. Infant food packages are arranged based on the participant's age
- iii. Infants up to 4 months of age can only have infant formula
- iv. Infants 4-5 months of age can have formula and infant cereal
- v. Infants 6-12 months of age can have formula, cereal and juice
- vi. Breastfeeding must be supported and encouraged

- b. Infant turning 1 year old

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- i. When an infant will be turning 1 year of age within the food package issuance dates, the CPA may authorize either the infant food package or the child food package based on nutritional need.
- ii. Breastfeeding must be supported and encouraged.

III. **Assigning Food Packages IV, V, VI and VII**

- a. Each participant is generally assigned a food package(s) for the entire certification period
- b. Food package assignments may be changed by the CPA:
 - i. any time during the certification period at the request of the participant if the participant's dietary needs change
- c. For women and children, standard food package choices are available based on participant preferences for:
 - i. packaging size and types of milk,
 - ii. dairy delivery (if available in the area),
 - iii. amount of cheese selected, and
 - iv. peanut butter/legume option.
- d. Specialized tailored food packages are also available based on a participant's specific dietary needs.
- e. Food package III can be prescribed with a medical prescription if a woman or a child needs a special dietary formula/product.
- f. Food packages IV - VII for these groups have the following options:
 - i. Standard packages
 - ii. Lactose-reduced milk packages
 - iii. Dairy delivery packages
 - iv. Goat's milk packages
 - v. Evaporated milk packages
 - vi. Powdered milk packages
 - vii. Acidophilus milk packages
 - viii. Buttermilk packages
 - ix. Homeless food packages
 - x. Anemia food packages
 - xi. Tailored food packages

IV. **Deciding if a woman or child needs Food Package III**

- a. Children and women with special dietary needs may receive special supplemental foods if the primary care physician determines that the

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

participant has a medical condition preventing the use of conventional foods and needing the use of a special formula.

- b. Breastfeeding is encouraged for these children (unless a rare contraindication exists) and must be supported through individual assessment and counseling.
 - i. The conditions include, but are not limited to metabolic disorders, inborn errors of metabolism, gastrointestinal disorders, malabsorption syndromes and allergies.
- d. Supplemental foods cannot be authorized solely for the purposes of:
 - i. enhancing nutrient intake, or
 - ii. managing body weight of children and women participants .
- e. Food Package III contains formula, juice and cereal.
 - i. Milk, beans, peanut butter and eggs **cannot** be issued in this package.

V. **Assigning the 5 digit Food Package code**

- a. The CPA/RD and participant select the specific food package(s) assigned to the participant for the entire certification period, e.g. for a 6 month period
- b. Food package codes need to be entered for each of the 1- 6 months in that participant's certification period
- c. Food package codes are 5 digits long
- d. The first letter relates to the WIC participants' category
 - i. I=Infant
 - ii. C=Child
 - iii. P=Pregnant and Breastfeeding Woman
 - iv. N=Postpartum Woman
 - v. B=Woman who is Breastfeeding exclusively
 - vi. S=Special Product for a Woman or a Child
- e. The second digit may be a letter or a number
 - i. the letter D stands for a dairy delivery package
 - ii. the number 4 generally denotes a package for infants 4-5 months of age
 - iii. the number 6 generally denotes a package for infants 6-12 months of age
 - iv. the numbers 8 or 9 generally denote a prorated food package
 - v. Digits 3 - 5 are numeric and specific to each food package. (e.g. I4579 is a package for an infant age 4-5 months.)

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

VI. What is printed on the voucher?

- a. Food packages consist of 1 - 9 vouchers. Food vouchers include the following information:
 - i. WIC ID number
 - ii. Name of the participant that the food is prescribed for
 - iii. Food package number
 - iv. Clinic
 - v. First day the voucher can be used
 - vi. Last day the voucher can be redeemed
 - vii. "Pay exactly" box - this is to be filled in by the vendor
 - viii. List of each food item and the amounts that the participant can buy with this voucher
 - ix. Box for the authorized vendor to stamp their name and WIC number
 - x. Authorized signature line

Policy: Formulas and product ordering

Some formulas and special products can be vouchered as a food package. Listed below are the formulas and products which can be vouchered since they are available on the shelves of most WIC approved grocery store vendors.

Procedure

- I. Available food packages
 - a. Standard infant formula (WIC primary contract and non-contract)
 - b. Hydrolysate formulas
 - c. Formulas for infants such as EnfaCare Lipil, NeoSure Advance
 - e. Products for children such a PediaSure, Kinderkal
 - f. Products for adults such as Boost, Ensure

Policy: Special Formula Ordering Process

Send your order electronically to the State WIC office according to the following procedures.

Procedure

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

I. Steps

a. Open your Special Formula Product Ordering file

b. Enter the following information:

- i. Date
- ii. Clinic
- iii. Client ID
- iv. Client first name
- v. Client last name
- vi. Vouchering period
- vii. Product name
- viii. Amount
- ix. Date needed by
- x. Medicaid (yes or no)
- xi. Tube fed (yes or no)
- xii. Clinic RD submitting order form
- xiii. State nutrition staff consulted prior to ordering, if applicable
- xiv. Plan/comments. Enter Medical diagnosis in ICD 9 terminology and plan for follow up

Policy: Medicaid Reimbursement

For WIC participants who are on Medicaid the cost of enteral and metabolic formulas will be covered under the following conditions:

Procedure

I. Tube Feedings: Participant

- a. Must be currently enrolled in Medicaid and receive services through a HMO or Fee For Services (FFS)
- b. Is on total nutrition by tube feeding due to a missing, damaged, or nonfunctional part of the gastric system
- c. May not be on tube feeding due to failure to thrive or psychological problems
- d. May not be receiving supplemental oral feedings
- e. Must receive a product that has a Medical Reimbursement Code that is listed on the Approved Medicaid Reimbursement Product List
- f. Must be on a special formula (not a standard breastmilk substitute)

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

II. Metabolic Formula: Participant

- a. Must be currently enrolled in Medicaid and receive services through a HMO or Fee For Services (FFS)
- b. Must receive a metabolic product that has a Medical Reimbursement Code that is listed on the Approved Medicaid Reimbursement Product List
- c. For those on Medicaid who are enrolled in an HMO, work with the HMO for payment. The HMO will be listed on the Medicaid card.
- d. For those on Medicaid not enrolled in an HMO, work with Medicaid for payment. "FFS" will be listed on the Medicaid card.

III. How to receive Medicaid coverage

- a. If a WIC participant meets either of the above criteria, the WIC RD should take the following steps:

Step	Action
1	Notify the participant that Medicaid or their HMO (listed on their Medicaid card) will provide product for them. Refer them to Medicaid or their HMO for prior approval.
2	Contact the State WIC office for assistance in obtaining approval from the State Medicaid office.
3	For participants on metabolic products, their Metabolic Clinic can be contacted to assist in this process.
4	WIC will provide product until prior approval is obtained; the participant should not be refused service.
5	Notify the participant that they will need to take the prescription to the pharmacy. The prescription must be complete. (It must include name of the client, name of the product, amount needed, the prescriptive authority's name and signature, date, diagnosis).
6	Medicaid will also need the following information: 1. The Medicaid ID number 2. The client's telephone number 3. Pharmacy's name and phone number 4. A copy of the Rx 5. The total product that WIC provides/the total amount that Medicaid will cover. 6. Diagnosis 7. The client must take this information to the pharmacy as well.
7	Document all procedures

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

IV. Medicaid Reimbursement beyond supplemental WIC

- a. For WIC participants who are receiving the maximum amount of formula authorized, and who are on Medicaid, Medicaid will provide additional formula needed by the participant under the following conditions:
 - i. The participant must be currently enrolled in Medicaid.
 - ii. The participant must receive a product that has a Medical reimbursement Code that is listed on the Approved Medicaid Reimbursement Product List.
 - iii. The participant must be receiving the maximum amount of formula authorized by WIC.
 - iv. Prescription must state the formula is needed.
 - v. Must be on a special formula (not a standard breastmilk substitute).
- b. The WIC CPA must:
 - i. Contact the State WIC office to assist in obtaining prior approval through the State Medicaid office.
 - ii. Document actions.

Policy: Sample products

Procedure

- I. Appropriate Role
 - a. WIC staff will be informed about the endorsement of breastfeeding and will have an understanding of their roles and responsibilities as well as the knowledge of adverse effects on breast milk production caused by supplemental formula.
 - b. WIC staff will make women who choose to breastfeed in the clinic comfortable.
 - c. Mead Johnson, the contract manufacturer, provides sample products of contract formulas for use in the local WIC clinics.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- d. Products can be obtained from the State by requesting specific products and amounts at the beginning of the month. They will be mailed to the local clinic by mid-month.
- e. All infant products must be stored out of the view of participants. Formula or pharmaceutical materials (handouts, fliers, brochures or promotional items should not be used).

II. Appropriate use of samples

- a. Breastfeeding is the normal, recommended and preferred method of infant feeding. Women should be informed of the risks associated with not breastfeeding and of the risk associated with the use of formula, prenatally, postnatally and prior to issuance of formula.
- b. Sample infant formula can be used in the *uncommon* situations where an infant would benefit from getting the formula.
- c. Sample products are not to be used to provide additional formula for infants *who routinely run out*. Remind participants that WIC is a *supplemental* program and infants may require additional purchase of formula.
- d. It is recommended that CPAs who are CLEs/LEs/CLCs authorize sample formula issuance.
- e. Breastfeeding women requesting formula must be carefully assessed and individually counseled regarding breastfeeding to prevent or minimize use of formula and to extend exclusive breastfeeding and duration. If formula is deemed appropriate for issuance, all women must be informed of the risks of decreased milk production and counseled to support breastfeeding.
- f. Formula should not be withheld from a participant. Not providing formula should never be used as a “punishment.”
- g. The amount of sample formula provided should not be deducted from the food package. However, prorated food packages are provided when 10 or 20 days have elapsed from the vouchering period; this is standard policy and it can be overridden upon CPA approval.
- h. Document the type and amount of formula given.
- i. Use the Infant formula logs to record all products received in and issued out from the clinic. Sample formula does not have to be recorded on the Infant Formula log.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

III. Examples of sample use

- a. The CPA should use professional discretion when issuing sample products.
- b. A woman and infant apply for WIC but requests formula until her certification appointment. This includes newborn infants, older infants, transfers, etc. If the infant is breastfeeding, counseling by a CPA, who is a CLE/LE/CLC, is recommended.
- c. An infant has reflux or has been ill with vomiting, or has prescription for increased calories, and needs additional formula.
- d. A participant is incorrectly preparing formula and needs additional formula.
- e. A breastfeeding participant requests formula to mix with her infant cereal (one can may last her two months).
- f. A participant has missed an appointment due to an illness, medical emergency, inclement weather, transportation problems, scheduling difficulty, etc. and requests formula until her re-scheduled appointment.
- g. A breastfeeding participant has surgery, or has a medical emergency and will be separated from her infant. The participant must also receive counseling and assistance from CPA, preferably a CLE/LE/CLC, regarding maintaining breastfeeding.
- h. A breastfeeding participant, in a rare situation, is taking contraindicating medications and needs to pump and discard breastmilk. Participant must also receive counseling and assistance from CPA regarding maintaining breastfeeding.
- i. Breastfeeding has decreased. Vouchers have already been used for a partial issuance of formula, but additional formula is requested. Allow without over-issuing.

H.7. Food Package Tailoring

Policy: Food Package Tailoring

The goal of the food package tailoring guidelines is to ensure that all participants receive the Utah WIC food package that best meets their individual nutritional needs. The tailoring guidelines will enable local agency nutritionists to prescribe food packages that directly correspond to the nutrition counseling given. In Utah, food packages are already designed and found in the “WIC Food Packages” book. There are many tailored food packages available within each food package group. Take the

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

time to review the numerous combinations available before food package prescription takes place.

Procedure

I. State guidelines

- a. Food packages prescribed shall help meet the individual nutritional and dietary needs of participants.
- b. Food packages are to be prescribed and changed only by the CPA. No changes may be made without the CPA's prescription.
- c. Document the reason for tailoring or any changes made to the food package.
- d. Prescription of, and changes in, food packages shall reflect changing individual nutrient and food consumption patterns. Foods not used by the participant may be tailored out of the package or quantities can be reduced to reflect need. It is not cost effective to provide food in greater quantities than are required to meet an individual's nutritional needs or to provide more food than an individual can consume.
- e. Tailoring may be advised when vouchering the participant may give them more than they can consume e.g. - in cases where a family may have access to milk or eggs.
- f. WIC is not a food storage program. The food items provided should be used in their diets daily to help meet their nutritional needs.
- g. When tailoring the milk portion of the food package, use the following guidelines:
 - i. Reduced fat and non-fat milk may be provided for all participants over 24 months of age unless they require additional calories.
 - ii. Milk and formula may not be mixed in the same food package.
 - iii. Milk alternatives include: Lactose-reduced milks, acidophilus milk, UHT, nonfat dry milk, evaporated milk, goat's milk, buttermilk and cheese. Food packages are available for all of these milk products.
- h. Packages for women and children with special dietary needs may only contain formula, juice and cereal. The CPA must document the need for the specific formula and the amounts prescribed. No other foods may be tailored into these food packages.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- i. Tailoring for an individual or for groups of individuals cannot be performed solely for economical reasons.
 - j. If, after thorough examination of the “Food Packages” book, there is not a food package that meets a participant’s needs, a request can be made to the State WIC office. See food issuance policies in this section.
 - k. Some special requested food items may be considered for individuals with special nutritional needs. Call the State WIC office regarding which items can be approved.
 - l. Food packages are available for homeless participants, participants with storage or refrigeration problems, and for individuals with anemia.
- II. Food package tailoring may occur at the following times:
- a. At certification and recertification for all participants.
 - b. At any time that a prescriptive authority documents the need for a change.
 - c. At the request of the participant.
 - d. At the discretion of the RD or CPA. (Changes may include decreasing or eliminating food that the participant is not consuming).
 - e. When a special formula is prescribed. The food package must always be tailored to the participant’s actual need for the formula.
- III. Tailoring food packages for homeless participants or participants with limited resources
- a. WIC participants who have limited facilities, or who have lost their normal place of residence due to loss of income, disaster or eviction, or who are escaping from domestic violence, may be temporarily relocated to emergency shelters, motels, hotels, or makeshift abodes within their WIC service area.
 - b. Due to the nature of these shelters, cooking facilities, refrigeration and acceptable storage areas for food may not be available.
 - c. For WIC participants living in temporary shelters, special consideration must be given to issuing supplemental food packages.
 - d. WIC vouchers should be issued monthly for all homeless individuals.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- e. The types of supplemental foods prescribed must take into account the cooking and storage facilities available to the participant while living in a temporary shelter.
- f. Although the aim of any food package prescription is to provide those supplemental foods to best meet the participant's nutritional needs, some modifications in both the types and the amounts of food may be required.
- g. The CPA should determine the following each month before the package is issued:
 - i. availability of refrigeration for foods and prepared formula
 - ii. availability of cooking facilities
 - iii. availability of food storage facilities
 - iv. availability of eating utensils
 - v. availability of the number and size of bottles for infant formula
 - vi. availability of bottle washing and sterilization facilities
 - vii. the parent/guardians' competence in special preparation, storage, and feeding of WIC foods (especially those foods that are perishable)
- h. Specific education concerning use and storage of foods should be provided.
 - i. Smaller amounts of WIC foods may need to be prescribed on each WIC voucher. Thus, the participant who is homeless may have more WIC vouchers than the average WIC participant.

IV. Guidelines for tailoring Food Package I, Infants 0-3 months

- a. Breastfeeding should be encouraged as the easiest, most nutritious and safest way to feed the infant, given the possibility that refrigeration and facilities for the proper sterilization of bottles may be lacking. For those infants to be formula fed, powdered formula should be issued.
- b. The mother must be instructed on proper sterilization techniques of bottles and nipples, and how to prepare one bottle of formula at a time due to the lack of refrigeration. The use of bottles with disposable plastic liners would eliminate the problem of sterilizing the bottles.
- c. In the event that both refrigeration and the means to sterilize bottles and water are lacking, 4 or 8 ounce bottles of ready-to-feed formula may be issued (depending on the weight of the infant and the number of ounces fed per feeding). Special education must be provided to the parent/guardian to discard all formula remaining in the bottle at the end of each feeding due to the potential for the rapid growth of harmful pathogens. If giving ready-to-feed (RTF) formula, up to 200 4-ounce bottles or up to 100 8-ounce bottles/cans may be issued. Consult with local vendors for availability of the RTF prior to issuing.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- V. Guidelines for tailoring Food Package II, Infants 4 to 12 months
 - a. In addition to infant formula, infants are eligible to receive iron fortified infant cereal beginning at 4, 5, or 6 months of age and juice beginning at 6 months of age, in addition to the infant formula. Cereal is available in 8 or 16 ounce boxes. Full strength juice may be offered in 6 ounce or 46 ounce cans.
 - b. Since the 4 to 12 month old infant does not require the continued use of sterilized bottles or water, all infants previously issued ready-to-feed formula must be changed over to a powdered infant formula package. In cases where unsanitary water supplies exist, continue to issue ready-to-feed in appropriate sized containers (32 ounces if refrigeration available).
- VI. Guidelines for tailoring Food Package III, Children/Women with Special Dietary Needs
 - a. Powdered formula should be issued whenever possible. Cereal and juice are also provided in this food package. Participants may receive:
 - i. 23, 6-ounce cans, or
 - ii. 3, 46-ounce single strength, or
 - iii. 12-ounce frozen cans
 - b. If possible, the juice should be stored in clean glass or plastic containers and consumed as soon as possible.

Policy: Guidance on economical/good buying practices

Encourage WIC participants to practice economical shopping habits to make the best use of WIC food monies and to teach better consumer practices.

Procedure

- I. Guidelines for buying practices
 - a. Buy and use dry milk powder for use in cooking.
 - b. Learn to cook with legumes (dry beans and peas) rather than more expensive sources of protein such as meats. Complement the legumes with grain products or dairy products to make a complete protein.
 - c. Buy powdered formula. (Powder yields more formula than concentrate).
 - d. Buy milk instead of cheese.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- e. Buy milk and juice in the largest available container that is practical for the participant's use (e.g. gallons of milk rather than half gallons).
 - f. Buy hot cereal instead of cold cereal.
- II. Guidance on handling participants with leftover foods
- a. The WIC food package should not be tailored at the expense of the participant's nutritional status.
 - b. If the CPA feels it is necessary for the participant to consume the full amount of foods prescribed, the first course of action would be to explore, with the participant, ways to increase her/his intake of the leftover food of a particular item that was prescribed (i.e., infant cereal, adult cereal, milk, cheese).
 - c. Each month discuss the participant's previous food issuance to determine if they are receiving an excessive amount. Approach this in a manner that will not make the participant afraid that WIC is trying to take food away from them each month.
 - d. Emphasize that WIC foods are to be consumed within a one month period and if substantial amounts are leftover, the food package can be tailored to meet the participant's individual needs.
 - e. When counseling the participant whose food package was decreased because of leftover food, please reassure the participant that if her need changes, the food package can be increased again.
- III. Guidance on Food Packages for women and children with poor refrigeration, storage, and/or cooking facilities:
- a. If proper refrigeration is lacking, eggs and fluid or evaporated milk must be excluded from the food package.
 - b. Dry powdered or UHT milk should be issued. Give instructions on how to use the powdered milk and the importance of preparing one glass at a time. If powdered skim milk is all that is available, counsel parents/guardians with 1 to 2 year old children on how to include adequate fat and calories in the child's diet to make up for the deficit of fat and calories in the milk.
 - c. Cereal and juice should still be provided in this food package in the amounts previously specified. Individual 6-ounce single strength cans of juice are the most appropriate size to issue those without adequate refrigeration. Maximum issuance for the 6-ounce can is:

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- i. 46 cans for FP IV and V
 - ii. 30 cans for FP VI
 - iii. 53 cans for FP VII
- d. Juice should be stored in clean glass or plastic containers and consumed as soon as possible.
- e. If a participant is receiving Food Package VII, issue 8 single-serving cans (3 ¼ ounce) of tuna. Two-16 ounce packages of carrots should also be issued.
- f. If cooking facilities are not available, peanut butter or canned beans should be recommended instead of dried beans and eggs. The recommended substitutes for 1 pound of dried beans or 2 dozen eggs are:
 - i. 18 ounces peanut butter, **or**
 - ii. 4 - 16 ounce canned beans

H.8. Nutrition and WIC Food Package Counseling Guidelines

Policy

I. Infant Formula

- a. During the first 4-6 months of life adequate intake of all nutrients can be supplied by human milk and a vitamin and/or mineral supplement, or by WIC approved iron fortified infant formula alone, without the introduction of solid food.
- b. Current research indicates that there is no nutritional or physiological advantage in the introduction of solid foods before 4-6 months of age. The early introduction of solid foods may result in overfeeding, gastrointestinal stress or allergic reaction.

II. Breastfed Infants

- a. The use of supplemental formula should be minimized for breastfeeding infants by providing only the amount of formula that the infant is consuming at the time of voucher issuance. Formula should not be given to exclusively breastfed infants.
- b. Formula may be given to a breastfed infant, but only when requested by the mother of the infant. All formula issued to a breastfed infant must be authorized by a CPA.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- c. Mothers who are requesting formula for the first time or who are requesting an increase in formula should be informed of the impact of formula supplementation on breastfeeding.
- d. Powder, rather than concentrate formula, should be recommended to mothers of breastfed infants who request formula.
- e. Infant formula should be evaluated on a case-by-case basis. Many low income or single mothers must return to work early or have other situations which will necessitate the use of formula. WIC staff working with WIC participants should be sensitive to a mother's need and should work with her to optimize the health of both the mother and the infant and support breastfeeding for as long as possible.

III. Infant cereal

- a. The introduction of iron fortified infant cereal is recommended at 4-6 months of age.
- b. At this time, the maximum amount of cereal need not be given. Use the following guidelines when prescribing cereal for infants:
 - i. 4-6 months, 1-2 tsp to 2 tbsp/day
 - ii. 6 - 8 months, up to 4-6 tbsp/day
 - iii. 8 -12 months, up to 4-6 tbsp/day with the addition of other age appropriate carbohydrates.
- c. Quantities given are for dry cereal, before mixing with liquid
- d. Some doctors do not recommend cereal until 6 months of age
- e. The packages of dry infant cereal will provide the following quantities of cereal:
 - i. 8 oz cereal/month will provide about 3 Tbsp/day
 - ii. 16 oz cereal/month will provide about 6 Tbsp/day
 - iii. 24 oz cereal/month will provide about 9 Tbsp/day
- f. A food package for infants when moms request infant cereal beginning at 6 months may be used. See current food package list for codes.
 - i. At approximately 4 months of age, most infants are able to accept cereal from a spoon.
 - ii. At this time discuss with the participant that infant cereal is a good source of iron especially when mixed with iron fortified formula, breastmilk, or after 6 months of age, infant juice.
 - iii. Mixing the cereal with infant juice may enhance the bioavailability of iron in infant cereal.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- iv. Plain cereals (rice, oatmeal and barley) are best to offer infant first as they are the least allergenic, especially rice cereal. Infant cereal should not be fed in a bottle or infant feeder.

IV. Juice for infants

- a. There is no nutritional indication for an infant to consume juice before she/he can drink from a cup (6-7 months).
- b. A sufficient amount of vitamin C is available from human milk and from prepared formula.
- c. The recommended amounts of juices are:
 - i. 6 - 9 months, 1 - 4 ounces per day.
 - ii. 9 -12 months, 3 - 4 ounces per day.
- d. Development of cup drinking skills should be encouraged and are usually acquired around 6 months of age.
- e. Parents/guardians should be educated that the risk of developing tooth decay in newly erupting teeth is higher when infants are allowed to suck continuously on a bottle of juice.
- f. Infants and toddlers should not be put to bed with a bottle of juice, formula, milk or any sweetened beverage because the fluid in the mouth provides an excellent medium for bacterial growth, which causes tooth decay.
- g. Encourage participants to provide the iron fortified cereal and the vitamin C enriched juice at the same meal.
 - i. This will increase iron absorption, and may prevent/resolve the risk of iron deficiency anemia.

V. Women and children with special needs (Food Package III):

- a. This food package is restricted to those individuals who have had a prescriptive authority determine that they have a medical nutritional condition which precludes or restricts them from conventional foods and necessitates the use of formula.
- b. The supplemental food prescribed cannot be authorized solely of the purposes of enhancing nutrient intake or managing body weight of children and women participants.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- c. Documentation of the prescriptive authority's determination of the need for formula, the specific formula prescribed and the amount needed must be included in the participant's file.
 - i. Formula amounts can be authorized on an individual basis for up to the maximum package.
 - ii. Individuals should only be given the amounts they can consume or are prescribed to consume.
 - iii. This applies to the cereal and juice allowances as well.
- d. Eggs, cheese, milk, peanut butter or beans **cannot** be given whenever the package is issued.

VI. **Children 1 to 5 years** (Food Package IV):

- a. **Milk**
 - i. The general guidelines for milk intake for children are 2-3 cups per day for a monthly total of 15-22 quarts.
 - ii. Food Package IV provides a maximum of 24 quarts of milk.
 - iii. The amount of milk prescribed, however, will depend on child's age, appetite and nutritional need condition.
 - iv. In order to meet their energy needs, children should receive whole milk during the second year (12-24 months). After 24 months, issue reduced or non fat milk unless child is underweight or failure to thrive.
- b. **Cereal**
 - i. The maximum amount of cereal prescribed is 36 ounces per month. A child size serving of cereal varies from $\frac{1}{4}$ cup for a 1 year old to $\frac{3}{4}$ cup for a 4 year old
 - ii. For children at risk of iron-deficiency, the WIC cereals provide excellent snacks. Some are particularly appropriate for finger-feeding of toddlers who have difficulty meeting their dietary iron needs and are at risk for iron deficiency.
- c. **Eggs**
 - i. Recommend the maximum quantity of eggs unless allergy or other contraindication exists.
 - ii. Eggs provide an excellent source of protein along with a diversity of other nutrients.
 - iii. Eggs are a high quality protein food, which are especially valuable for feeding preschoolers who are often finicky about eating meats and other high quality protein foods.
 - iv. If a child is not eating the full amount of eggs, educate the parents as to the nutritional value of eggs.
 - v. If a child does not like eggs, encourage their use in cooking and other ways, e.g. - french toast, eggnog, custard, egg salad, casseroles, etc.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- vi. Some participants may avoid eggs, due to a fear of dietary cholesterol. In general, most young children and pregnant women do not need to follow low cholesterol diets.
- vii. Participants at risk for hypercholesterolemia (family history of CVD) should be referred to a dietitian for counseling and food package tailoring.
- d. Juice
 - i. Three 46-ounce cans of juice or the equivalent in reconstituted frozen concentrate will provide the RDA for vitamin C for this age group.
 - ii. By encouraging participants to increase their consumption of WIC juices, it is hoped that their intake of soda pop and other sugar based drinks which contain little or no nutritional value will be reduced.
 - iii. When prescribing up to the maximum amount of juice, take into account age and nutritional need.
 - iv. Anemic children will benefit from receiving the maximum quantity of juice, due to the enhancement of iron absorption when vitamin C is consumed at the same meal.
- e. Peanut butter or legumes
 - i. Peanut butter or legumes should be encouraged in the food prescription for the protein contribution they make in the diets of often-finicky young children.

VII. **Child with a low hematocrit/hemoglobin**

- a. Prescribe a food package which will increase his/her intake of iron (legumes, cereal), vitamin C (fruit juice), and protein-rich foods (eggs, legumes, peanut butter)
- b. Feeding too much milk or cheese (which have low iron content) may prevent the child from eating adequate amounts of meat, dried beans and cereal which are good sources of iron.
- c. Bottle feeding should be discontinued after a child turns one, with small portions of milk (1/2 cup) fed by cup with meals and snacks.
- d. Cheese can be used judiciously to enhance acceptance of vegetables, legumes and meats when used in combination dishes at mealtime.
- e. As often as possible, vitamin C enriched juice should be drank with eggs, iron fortified cereal, and legumes.
 - i. This will increase the amount of iron absorbed from the meal.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- f. In order to increase the iron content of the food package of the child with a low hematocrit/hemoglobin, legumes, rather than peanut butter, should be encouraged in the food prescription.

VIII. **Child with an inadequate growth pattern**

- a. Evaluate the diet to see if milk is deficient in the diet or if it is over-consumed at the expense of other food.
- b. The diet should also be assessed to see if the amount of protein and calories in the diet is deficient.
 - i. Peanut butter or legumes should be encouraged in the food prescription or their protein contribution to the diet.
- c. The child should be encouraged to eat a variety of foods in order to meet his/her dietary needs adequately.
- d. The WIC foods serve as excellent staples in the diet.
- e. Issue whole milk food package. The use of whole milk, cheese, and peanut butter will increase calorie density of the diet and support faster growth.
- f. More frequent follow-up visits with the nutritionist are necessary for children who continue to grow poorly.

IX. **Child with G.I. disease**

- a. Issue peanut butter every month when G.I. diseases which would prevent the participant from eating dried beans (e.g. - irritable bowel syndrome, gastroesophageal fistulas, recent surgery, dumping syndrome, GI ulcers, Crohn's disease).

X. **Child over the age of two who is at greater than the 90th percentile BMI**

- a. The parent should be educated as to the use of low fat or skim milk rather than whole milk.
- b. The use of peanut butter may be limited with legumes offered in their place.
- c. The parent should also be educated as to the benefits and methods of appropriate activity and energy balance for the prevention of obesity.

XI. **Pregnant and breastfeeding women (Food Package V and VII):**

- a. Encourage the use of the full food package.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- b. Issue reduced or nonfat milk unless woman is underweight or gaining inadequate weight.
- c. If the woman does not like to drink milk, encourage the use of cheeses and the use of milk products in cooking.
- d. Always ask if she is eating all the food prescribed to her
 - i. If not, she should be referred to the clinic nutritionist for dietary counseling.
- e. If milk is left over, the food package may need to be tailored and calcium intake assessed.
- f. To enhance iron absorption for the anemic pregnant or breastfeeding woman, suggest the use of cereals providing 100% USRDA of iron, legumes rather than peanut butter, and also the consumption of vitamin C enriched juices at the same meal as the iron fortified cereal and eggs.
- g. Weight reduction should never be recommended for the obese, pregnant woman.
- h. To control the rate of weight gain of an obese woman during pregnancy, or to enable gradual weight loss for the obese, lactating woman, issue low fat or skim milk.
- i. It is not recommended to reduce her total milk allowance, as that could cause inadequate nutrient intake.
- j. Limit the cheese prescribed to 1 pound per month.
- k. Suggest legumes in place of peanut butter.
- l. These recommendations reduce the caloric intake without compromising the nutrients provided by the food package.
- m. Pregnant or breastfeeding women should be encouraged to choose legumes rather than peanut butter for their superior iron and folic acid contents.
 - i. However, teens and women with low weight gain may do better with the additional calories provided by peanut butter, if it is preferred.

IX. **Breastfeeding women**

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- a. State agencies are not allowed to define “breastfeeding women” in a manner that is more restrictive than regulatory and legislative definitions (see definition in Section A).
- b. All women who are fully or partially breastfeeding their infant to any degree and are less than one year postpartum, must be categorized as “breastfeeding women”.
- c. The effect of a more restrictive definition would be the denial of WIC benefits to women eligible under law and regulations.
- d. The standard food packages for the breastfeeding woman should provide the maximum monthly allowances of the WIC foods.
- e. The breastfeeding woman should not receive less than the regulatory maximum amounts of foods unless the CPA determines that this is appropriate and based on an assessment of her individual nutritional needs.
- f. Generally, the nutritional needs of a breastfeeding woman, regardless of the extent to which she breastfeeds, exceed those of a non-breastfeeding, postpartum woman.
- g. Therefore, it is appropriate that the standard food packages for a breastfeeding woman provide a greater quantity and variety of foods than the standard food package offered to a non-breastfeeding, postpartum woman.
- h. The breastfeeding mother’s food package will not automatically decrease in the event, or to the degree, that formula is prescribed to her infant.

X. **Postpartum women** (Food Package VI):

- a. The postpartum woman who is recovering from an uncomplicated pregnancy and birth may not need to eat the maximum amounts of foods provided for her in Food Package VI.
- b. If the non-breastfeeding, postpartum woman’s protein intake is adequate (as evaluated by dietary interview), 16 quarts of milk per month (including cheese equivalent), or 2 cups per day, should be sufficient to meet dietary needs.
- c. If the dietary assessment reveals that the protein intake is inadequate, the full 24 quarts (including cheese equivalent) of milk per month should be issued.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- d. The woman should be encouraged to eat the foods and counseled on the use of milk products in cooking.
- e. Any postpartum, non-breastfeeding woman who is at greater than or equal to 120% of the standard in weight for height, or has gained greater than 40 pounds during her pregnancy, should be encouraged to use low fat alternatives when possible.
- f. Issue low-fat or skim milk and discourage cheese as a substitute for milk in order to reduce the caloric level of the food package.
- g. In order to replenish the iron stores possibly depleted by the pregnancy, the iron fortified cereal and vitamin C enriched juice should be eaten at the same meal.

XIII. Use of legumes

- a. Participants who report gastrointestinal intolerance of legumes should be encouraged to use the legumes in ways which will result in less gastric problems. Some suggested methods are:
 - i. Use split peas, limas and lentils as these are less gas producing than other legumes.
 - ii. Cook the beans for a long time at a low heat to help reduce the legumes' flatulence causing properties.
 - iii. Drain the soak water and use fresh water for cooking legumes.
 - iv. Incorporate small amounts of the beans into recipes, using them as meat extenders. For example, use beans in soups, stews, chili, tacos, burritos, tostadas.
 - v. Eat small servings at first giving the digestive system a few weeks to adjust to the beans.

References

- (1) American Academy of Pediatrics, *Pediatric Nutrition Handbook*, Evanston, Illinois, 1993, American Academy of Pediatrics.
- (2) Institute of Medicine, National Academy of Sciences, *Nutrition During Pregnancy*, National Academy Press, Washington, D.C. 1990
- (3) Institute of Medicine, National Academy of Sciences, *Nutrition During Lactation*, National Academy Press, Washington, D.C. 1991
- (4) National Research Council, *Recommended Dietary Allowances*, Washington, D.C., 1989, National Academy of Sciences.

Utah WIC Policy and Procedures Manual

Section H: Supplementary Foods

- (5) Worthington-Roberts, B.S., Williams, S.R.: *Nutrition in Pregnancy and Lactation*, 5th Ed., St. Louis, 1989, C.V. Mosby Company.